

**Fill in this information to identify your case:**

Debtor 1 **James Edward Mills**  
First Name Middle Name Last Name

Debtor 2 **Sarah Rebecca Mills**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **16-14011**  
(if known)

☐ Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	<b>Schedule A/B: Property</b> (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ <b>104,000.00</b>
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ <b>23,080.00</b>
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ <b>127,080.00</b>

#### Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	<b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ <b>964,914.79</b>
3.	<b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$ <b>22,000.00</b>
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	\$ <b>568,957.54</b>
<b>Your total liabilities</b>		\$ <b>1,555,872.33</b>

#### Part 3: Summarize Your Income and Expenses

4.	<b>Schedule I: Your Income</b> (Official Form 106I) Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$ <b>2,550.00</b>
5.	<b>Schedule J: Your Expenses</b> (Official Form 106J) Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$ <b>4,618.50</b>

#### Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☒ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ \_\_\_\_\_

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

	Total claim
<b>From Part 4 on Schedule E/F, copy the following:</b>	
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>22,000.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <u>0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.	\$ <u>22,000.00</u>

Fill in this information to identify your case and this filing:

Debtor 1 **James Edward Mills**  
First Name Middle Name Last Name

Debtor 2 **Sarah Rebecca Mills**  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **16-14011**

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

**3337 Tocowa Road**

Street address, if available, or other description

**Courtland MS 38620-0000**

City State ZIP Code

**Panola**

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☒ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

**Lien to Southern Bancorp**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

**\$91,000.00**

Current value of the portion you own?

**\$91,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

**Fee Simple**

☐ Check if this is community property (see instructions)

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

**If you own or have more than one, list here:**

1.2

**Skating Rink Road**

Street address, if available, or other description

**Crowder** **MS** **38622-0000**  
City State ZIP Code

**Quitman**

County

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☒ Manufactured or mobile home  
☒ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

**Lien to Southern Bancorp**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$12,000.00**  
Current value of the portion you own? **\$12,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Fee simple**

☐ Check if this is community property (see instructions)

1.3

**If you own or have more than one, list here:**

**Skating Rink Road**

Street address, if available, or other description

**Crowder** **MS** **38622-0000**  
City State ZIP Code

**Quitman**

County

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☒ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

**no lien  
Lot only**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$1,000.00**  
Current value of the portion you own? **\$1,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Fee Simple**

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

**\$104,000.00**

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

☐ No  
☒ Yes

3.1 Make: **Ford**  
Model: **F-150**  
Year: **2012**  
Approximate mileage: **130,000**  
Other information:  
**Lien to Southern Bancorp**

**Who has an interest in the property?** Check one

☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

**\$9,000.00**

**\$9,000.00**

3.2 Make: **Nissan**  
Model: **Altima**  
Year: **2003**  
Approximate mileage: **180,000**  
Other information:  
**Lien to Stanley Auto Sales (Not running)**

**Who has an interest in the property?** Check one

☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

**\$2,500.00**

**\$2,500.00**

3.3 Make: **Chevrolet**  
Model: **Dually**  
Year: **2000**  
Approximate mileage: **160,000**  
Other information:  
**Lien to Tower Loan (Not running)**

**Who has an interest in the property?** Check one

☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

**\$2,000.00**

**\$2,000.00**

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No  
☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

**\$13,500.00**

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

**Household goods including living room set, TVs, stove, refrigerator, microwave, kitchenware, kitchen table & chairs, washing machine, dryer, bedroom furniture, linens, etc.**

**\$5,000.00**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

**7. Electronics**

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

**3 TVs**

**\$300.00**

**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☒ Yes. Describe.....

**Books & pictures**

**\$100.00**

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe.....

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

☐ No

☒ Yes. Describe.....

**Shotgun**

**\$125.00**

**Deer rifle**

**\$200.00**

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

**Clothing**

**\$750.00**

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

**Wedding rings/bands**

**\$150.00**

**Miscellaneous jewelry**

**\$30.00**

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

☐ No

☒ Yes. Describe.....

**3 dogs**

**\$75.00**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

**16 horses (very old/in poor condition)**

**\$1,600.00**

**14. Any other personal and household items you did not already list, including any health aids you did not list**

- ☒ No  
☐ Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

**\$8,330.00**

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☐ No  
☒ Yes.....

**Cash**

**\$1,000.00**

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No  
☒ Yes..... Institution name:

**17.1. checking account Southern Bancorp**

**\$0.00**

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No  
☐ Yes..... Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

- ☐ No  
☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

**MSM Farms Dirt Moving, LLC (no equity)**

**100 %**

**\$0.00**

**3M Farms, LLC (no equity)**

**100 %**

**\$0.00**

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

- ☒ No  
☐ Yes. Give specific information about them  
Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☒ No  
☐ Yes. List each account separately.

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

Type of account: Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☐ No

☒ Yes. ....

Institution name or individual:

**Utility deposit**

**\$250.00**

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes..... Issuer name and description.

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them...

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

☐ No

☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

**Potential federal income tax refund proceeds**

**Federal**

**Unknown**

**Potential state income tax refund proceeds**

**State**

**Unknown**

**Potential earned income tax credit refund proceeds**

**Earned Income Credit**

**Unknown**

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....



Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No  
☐ Yes. Give specific information..

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No  
☐ Yes. Name the insurance company of each policy and list its value.  
Company name:

Beneficiary:

Surrender or refund  
value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No  
☐ Yes. Give specific information..

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No  
☐ Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☐ No  
☒ Yes. Describe each claim.....

**potential claim against Southern Bancorp (no representation)**

**Unknown**

**35. Any financial assets you did not already list**

- ☒ No  
☐ Yes. Give specific information..

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

**\$1,250.00**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

- ☐ No. Go to Part 6.  
☒ Yes. Go to line 38.

**Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.

**38. Accounts receivable or commissions you already earned**

- ☒ No  
☐ Yes. Describe.....

**39. Office equipment, furnishings, and supplies**

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No  
☐ Yes. Describe.....

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

- ☐ No

Debtor 1 **James Edward Mills**  
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Case number (if known) **16-14011**

☐ Yes. Describe.....

**Farming machinery & equipment (liens to Southern Bancorp/no equity)**  
**The farm equipment was repossessed prepetition but not sold**

**Unknown**

**41. Inventory**

☐ No  
☐ Yes. Describe.....

**42. Interests in partnerships or joint ventures**

☐ No  
☐ Yes. Give specific information about them.....  
Name of entity:

% of ownership:

**43. Customer lists, mailing lists, or other compilations**

☐ No.  
☐ Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
☐ No  
☐ Yes. Describe.....

**44. Any business-related property you did not already list**

☐ No  
☐ Yes. Give specific information.....

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....**

**\$0.00**

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

☐ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples: Season tickets, country club membership*

☐ No  
☐ Yes. Give specific information.....

**54. Add the dollar value of all of your entries from Part 7. Write that number here .....**

**\$0.00**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

**Part 8:** List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....		<b>\$104,000.00</b>
56. Part 2: Total vehicles, line 5	<b>\$13,500.00</b>	
57. Part 3: Total personal and household items, line 15	<b>\$8,330.00</b>	
58. Part 4: Total financial assets, line 36	<b>\$1,250.00</b>	
59. Part 5: Total business-related property, line 45	<b>\$0.00</b>	
60. Part 6: Total farm- and fishing-related property, line 52	<b>\$0.00</b>	
61. Part 7: Total other property not listed, line 54	<b>\$0.00</b>	
	<b>+</b>	
62. Total personal property. Add lines 56 through 61...	<b>\$23,080.00</b>	Copy personal property total <b>\$23,080.00</b>
63. Total of all property on Schedule A/B. Add line 55 + line 62		<b>\$127,080.00</b>

## Fill in this information to identify your case:

Debtor 1	<b>James Edward Mills</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Sarah Rebecca Mills</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF MISSISSIPPI		
Case number (if known)	16-14011		

☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1:** Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
3337 Tocowa Road Courtland, MS 38620 Panola County Lien to Southern Bancorp Line from <i>Schedule A/B</i> : 1.1	\$91,000.00	<input checked="" type="checkbox"/> \$75,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-21
2003 Nissan Altima 180,000 miles Lien to Stanley Auto Sales (Not running) Line from <i>Schedule A/B</i> : 3.2	\$2,500.00	<input checked="" type="checkbox"/> \$2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
Household goods including living room set, TVs, stove, refrigerator, microwave, kitchenware, kitchen table & chairs, washing machine, dryer, bedroom furniture, linens, etc. Line from <i>Schedule A/B</i> : 6.1	\$5,000.00	<input checked="" type="checkbox"/> \$5,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
3 TVs Line from <i>Schedule A/B</i> : 7.1	\$300.00	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
Books & pictures Line from <i>Schedule A/B</i> : 8.1	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>Shotgun</b> Line from Schedule A/B: <b>10.1</b>	<b>\$125.00</b>	<input checked="" type="checkbox"/> <b>\$125.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(a)</b>
<b>Deer rifle</b> Line from Schedule A/B: <b>10.2</b>	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(a)</b>
<b>Clothing</b> Line from Schedule A/B: <b>11.1</b>	<b>\$750.00</b>	<input checked="" type="checkbox"/> <b>\$750.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(a)</b>
<b>Wedding rings/bands</b> Line from Schedule A/B: <b>12.1</b>	<b>\$150.00</b>	<input checked="" type="checkbox"/> <b>\$150.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(a)</b>
<b>3 dogs</b> Line from Schedule A/B: <b>13.1</b>	<b>\$75.00</b>	<input checked="" type="checkbox"/> <b>\$75.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(a)</b>
<b>16 horses (very old/in poor condition)</b> Line from Schedule A/B: <b>13.2</b>	<b>\$1,600.00</b>	<input checked="" type="checkbox"/> <b>\$1,600.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(a)</b>
<b>Cash</b> Line from Schedule A/B: <b>16.1</b>	<b>\$1,000.00</b>	<input checked="" type="checkbox"/> <b>\$1,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(a)</b>
<b>Federal: Potential federal income tax refund proceeds</b> Line from Schedule A/B: <b>28.1</b>	<b>Unknown</b>	<input checked="" type="checkbox"/> <b>\$10,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(j)</b>
<b>State: Potential state income tax refund proceeds</b> Line from Schedule A/B: <b>28.2</b>	<b>Unknown</b>	<input checked="" type="checkbox"/> <b>\$10,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(k)</b>
<b>Earned Income Credit: Potential earned income tax credit refund proceeds</b> Line from Schedule A/B: <b>28.3</b>	<b>Unknown</b>	<input checked="" type="checkbox"/> <b>\$10,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Miss. Code Ann. § 85-3-1(i)</b>

3. **Are you claiming a homestead exemption of more than \$160,375?**  
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

**Fill in this information to identify your case:**

Debtor 1 **James Edward Mills**  
First Name Middle Name Last Name

Debtor 2 **Sarah Rebecca Mills**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **16-14011**  
(if known)

☐ Check if this is an amended filing

**Official Form 106D**

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	<b>ARM Ag Resource Management</b> <small>Creditor's Name</small>  <b>P.O. Box 568</b> <b>2222 Louisa Street</b> <b>Rayville, LA 71269</b> <small>Number, Street, City, State &amp; Zip Code</small>	<b>\$172,176.66</b>  <b>Equipment (Abandon)</b> <b>Business debt</b> <b>Judgment</b> <small>As of the date you file, the claim is: Check all that apply.</small> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<b>Unknown</b>	<b>Unknown</b>
<b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
<b>Date debt was incurred</b> _____		<b>Last 4 digits of account number</b> _____		

2.2	<b>GreenPoint Ag, LLC</b> <small>Creditor's Name</small>  <b>16093 Highway 35 S</b> <b>Batesville, MS 38606</b> <small>Number, Street, City, State &amp; Zip Code</small>	<b>\$32,050.04</b>  <b>Judgment</b> <b>Business debt</b> <small>As of the date you file, the claim is: Check all that apply.</small> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<b>\$0.00</b>	<b>\$32,050.04</b>
<b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
<b>Date debt was incurred</b> <b>07/25/13</b>		<b>Last 4 digits of account number</b> _____		

Debtor 1 **James Edward Mills** Case number (if know) **16-14011**  
 First Name Middle Name Last Name  
 Debtor 2 **Sarah Rebecca Mills**  
 First Name Middle Name Last Name

<b>2.3 Healthcare Financial Services</b> Creditor's Name  <b>911 Flynt Drive</b> <b>Flowood, MS 39232</b> Number, Street, City, State & Zip Code	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;"><b>Judgment</b></div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<b>\$4,725.00</b>	<b>\$0.00</b>	<b>\$4,725.00</b>
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**Who owes the debt?** Check one.  
☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred **03/17/14** Last 4 digits of account number \_\_\_\_\_

<b>2.4 Huron Smith Oil Co., Inc.</b> Creditor's Name  <b>P.O. Box 1569</b> <b>Batesville, MS 38606</b> Number, Street, City, State & Zip Code	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;"><b>fuel Judgment</b></div> <b>Business debt</b> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<b>\$2,000.00</b>	<b>\$0.00</b>	<b>\$2,000.00</b>
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**Who owes the debt?** Check one.  
☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

<b>2.5 Internal Revenue Service</b> Creditor's Name  <b>100 West Capitol Street</b> <b>Stop 18</b> <b>Jackson, MS 39269</b> Number, Street, City, State & Zip Code	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;"><b>federal tax lien</b></div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>federal tax lien</b>	<b>\$6,000.00</b>	<b>\$0.00</b>	<b>\$6,000.00</b>
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**Who owes the debt?** Check one.  
☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Debtor 1 **James Edward Mills** Case number (if know) **16-14011**  
 First Name Middle Name Last Name  
 Debtor 2 **Sarah Rebecca Mills**  
 First Name Middle Name Last Name  
 Date debt was incurred Last 4 digits of account number

2.6 **MS Department of Revenue** Describe the property that secures the claim: **\$16,000.00** **\$0.00** **\$16,000.00**  
 Creditor's Name **state tax lien**  
**Bankruptcy Section**  
**P.O. Box 22808**  
**Jackson, MS 39225**  
 Number, Street, City, State & Zip Code  
 As of the date you file, the claim is: Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Nature of lien. Check all that apply.  
☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset) **state tax lien**  
 Who owes the debt? Check one.  
☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt  
 Date debt was incurred Last 4 digits of account number

2.7 **Southern Bancorp** Describe the property that secures the claim: **\$17,241.00** **\$9,000.00** **\$8,241.00**  
 Creditor's Name **2012 Ford F-150 (Abandon)**  
**Business debt**  
**Post Office Box 248**  
**Arkadelphia, AR 71923**  
 Number, Street, City, State & Zip Code  
 As of the date you file, the claim is: Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Nature of lien. Check all that apply.  
☒ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset)  
 Who owes the debt? Check one.  
☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt  
**Opened 2/21/13**  
**Last Active 3/07/16**  
 Date debt was incurred Last 4 digits of account number **9768**

2.8 **Southern Bancorp** Describe the property that secures the claim: **\$213,081.35** **Unknown** **Unknown**  
 Creditor's Name **Farm Equipment (Abandon)**  
**Business debt**  
**875 South State Street**  
**P.O. Box 1825**  
**Clarksdale, MS 38614**  
 Number, Street, City, State & Zip Code  
 As of the date you file, the claim is: Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Nature of lien. Check all that apply.  
☒ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
 Who owes the debt? Check one.  
☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another



Debtor 1 **James Edward Mills** Case number (if know) **16-14011**  
 First Name Middle Name Last Name  
 Debtor 2 **Sarah Rebecca Mills**  
 First Name Middle Name Last Name

☐ Check if this claim relates to a community debt ☐ Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number **7825**

<b>2.9</b> <b>Southern Bancorp</b> <small>Creditor's Name</small>  <b>875 South State Street</b> <b>P.O. Box 1825</b> <b>Clarksdale, MS 38614</b> <small>Number, Street, City, State &amp; Zip Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;"> <b>Farm Equipment (Abandon)</b>  <b>Business debt</b> </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<b>\$252,535.39</b>	<b>Unknown</b>	<b>Unknown</b>
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Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number **5950**

<b>2.1</b> <b>0</b> <b>Southern Bancorp</b> <small>Creditor's Name</small>  <b>875 South State Street</b> <b>P.O. Box 1825</b> <b>Clarksdale, MS 38614</b> <small>Number, Street, City, State &amp; Zip Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;"> <b>Farm Equipment (Abandon)</b>  <b>Business debt</b> </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<b>\$18,187.43</b>	<b>Unknown</b>	<b>Unknown</b>
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Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number **6528**

<b>2.1</b> <b>1</b> <b>Southern Bancorp</b> <small>Creditor's Name</small>  <b>875 South State Street</b> <b>P.O. Box 1825</b> <b>Clarksdale, MS 38614</b> <small>Number, Street, City, State &amp; Zip Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;"> <b>3 Mobile homes &amp; land</b> </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit	<b>\$15,567.16</b>	<b>\$12,000.00</b>	<b>\$3,567.16</b>
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Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Debtor 1 **James Edward Mills** Case number (if know) **16-14011**  
 First Name Middle Name Last Name  
 Debtor 2 **Sarah Rebecca Mills**  
 First Name Middle Name Last Name

☐ Check if this claim relates to a community debt ☐ Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number **0321**

<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">2.1 2</div> <p><b>Southern Bancorp</b>        Creditor's Name   <b>875 South State Street</b>  <b>P.O. Box 1825</b>  <b>Clarksdale, MS 38614</b>        Number, Street, City, State &amp; Zip Code</p>	<p><b>Describe the property that secures the claim:</b></p> <div style="border: 1px solid black; padding: 5px; min-height: 30px;"> <b>House &amp; 18 acres</b> </div> <p><b>As of the date you file, the claim is:</b> Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  <b>Nature of lien.</b> Check all that apply.  <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>	<p><b>\$48,106.50</b></p> <p><b>\$91,000.00</b></p> <p><b>\$0.00</b></p>
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**Who owes the debt?** Check one.  
☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number **5317**

<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">2.1 3</div> <p><b>Southern Bancorp</b>        Creditor's Name   <b>875 South State Street</b>  <b>P.O. Box 1825</b>  <b>Clarksdale, MS 38614</b>        Number, Street, City, State &amp; Zip Code</p>	<p><b>Describe the property that secures the claim:</b></p> <div style="border: 1px solid black; padding: 5px; min-height: 30px;"> <b>2007 9520 John Deere Tractor</b>  <b>2009 9630 John Deere Tractor</b> </div> <p><b>As of the date you file, the claim is:</b> Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  <b>Nature of lien.</b> Check all that apply.  <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>	<p><b>\$145,168.00</b></p> <p><b>\$100,000.00</b></p> <p><b>\$45,168.00</b></p>
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**Who owes the debt?** Check one.  
☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number **3458**

<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">2.1 4</div> <p><b>Stanley Auto Sales</b>        Creditor's Name   <b>615 Highway 6 East</b>  <b>Batesville, MS 38606</b>        Number, Street, City, State &amp; Zip Code</p>	<p><b>Describe the property that secures the claim:</b></p> <div style="border: 1px solid black; padding: 5px; min-height: 30px;"> <b>2003 Nissan Altima</b> </div> <p><b>As of the date you file, the claim is:</b> Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  <b>Nature of lien.</b> Check all that apply.  <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p>	<p><b>\$1,300.00</b></p> <p><b>\$2,500.00</b></p> <p><b>\$0.00</b></p>
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**Who owes the debt?** Check one.  
☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only

Debtor 1 **James Edward Mills** Case number (if know) **16-14011**  
 First Name Middle Name Last Name  
 Debtor 2 **Sarah Rebecca Mills**  
 First Name Middle Name Last Name

☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit  
☐ Check if this claim relates to a community debt ☐ Other (including a right to offset)

Date debt was incurred Last 4 digits of account number

2.1  
5 **Tower Loan of Batesville** Describe the property that secures the claim: **\$5,276.00** **\$2,000.00** **\$3,276.00**  
 Creditor's Name

**P.O. Box 1647**  
**Batesville, MS 38606**

Number, Street, City, State & Zip Code

**2000 Chevrolet Dually (Abandon)**  
**Household goods**

As of the date you file, the claim is: Check all that apply.

☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset)

Who owes the debt? Check one.

☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

**Opened**  
**11/02/15**  
**Last Active**  
**8/15/16**

Date debt was incurred Last 4 digits of account number **6546**

2.1  
6 **Wade, Inc.** Describe the property that secures the claim: **\$15,500.26** **\$0.00** **\$15,500.26**  
 Creditor's Name

**c/o Victoria J. Prince**  
**Attorney at Law**  
**P.O. Box 1563**  
**Batesville, MS 38606**

Number, Street, City, State & Zip Code

**Open account**  
**Judgment**  
**Business debt**

As of the date you file, the claim is: Check all that apply.

☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☒ Judgment lien from a lawsuit  
☐ Other (including a right to offset)

Who owes the debt? Check one.

☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$964,914.79**

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

**\$964,914.79**

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Debtor 1 **James Edward Mills**

Case number (if know) **16-14011**

First Name Middle Name Last Name

Debtor 2 **Sarah Rebecca Mills**

First Name Middle Name Last Name

☐

Name, Number, Street, City, State & Zip Code

**First Security Bank  
P.O. Box 690  
Batesville, MS 38606**

On which line in Part 1 did you enter the creditor? **2.14**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Healthcare Financial Services, LLC  
P.O. Box 320309  
Jackson, MS 39232**

On which line in Part 1 did you enter the creditor? **2.3**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Huron Smith Oil Co., Inc.  
203 Hays Street  
Batesville, MS 38606**

On which line in Part 1 did you enter the creditor? **2.4**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Huron Smith Oil Co., Inc.  
c/o James Andrew Yelton  
Post Office Box 1615  
Batesville, MS 38606**

On which line in Part 1 did you enter the creditor? **2.4**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Internal Revenue Service  
c/o US Attorney  
900 Jefferson Avenue  
Oxford, MS 38655**

On which line in Part 1 did you enter the creditor? **2.5**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Internal Revenue Service  
P.O. Box 7346  
Philadelphia, PA 19101-7346**

On which line in Part 1 did you enter the creditor? **2.5**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**James Andrew Yelton  
Attorney at Law  
P.O. Drawer 1615  
Batesville, MS 38606**

On which line in Part 1 did you enter the creditor? **2.4**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**John Tucker  
Attorney at Law  
Post Office Box 320001  
Flowood, MS 39232**

On which line in Part 1 did you enter the creditor? **2.15**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**L. Bradley Dillard  
Attorney at Law  
P.O. Box 7120  
Tupelo, MS 38802**

On which line in Part 1 did you enter the creditor? **2.2**

Last 4 digits of account number \_\_\_\_

Debtor 1 **James Edward Mills**

Case number (if know) **16-14011**

First Name Middle Name Last Name

Debtor 2 **Sarah Rebecca Mills**

First Name Middle Name Last Name

☐

Name, Number, Street, City, State & Zip Code

**Robert G. Johnson**

**Attorney at Law**

**P.O. Box 1737**

**Cleveland, MS 38732**

On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Southern Bancorp**

**875 South State Street**

**P.O. Box 1825**

**Clarksdale, MS 38614**

On which line in Part 1 did you enter the creditor? **2.7**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Southern Bancorp**

**c/o Jeff Rawlings**

**Attorney at Law**

**P.O. Box 1789**

**Madison, MS 39130**

On which line in Part 1 did you enter the creditor? **2.7**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Southern Bancorp**

**Post Office Box 248**

**Arkadelphia, AR 71923**

On which line in Part 1 did you enter the creditor? **2.8**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Southern Bancorp**

**Post Office Box 906**

**Indianola, MS 38751**

On which line in Part 1 did you enter the creditor? **2.8**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Southern Bancorp of MS**

**Attn: Bankruptcy**

**605 Main Street, Suite 203**

**Arkadelphia, AR 71923**

On which line in Part 1 did you enter the creditor? **2.8**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Tower Loan**

**P.O. Box 320001**

**Flowood, MS 39232**

On which line in Part 1 did you enter the creditor? **2.15**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Tower Loan**

**Bankruptcy Department**

**P.O. Box 320367**

**Flowood, MS 39232**

On which line in Part 1 did you enter the creditor? **2.15**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Wade Inc.**

**P.O. Box 391**

**Batesville, MS 38606**

On which line in Part 1 did you enter the creditor? **2.16**

Last 4 digits of account number \_\_\_\_

Debtor 1 **James Edward Mills**

First Name Middle Name Last Name

Case number (if know) **16-14011**

Debtor 2 **Sarah Rebecca Mills**

First Name Middle Name Last Name

☐

Name, Number, Street, City, State & Zip Code

**Wade, Inc.**

**P.O. Box 551**

**Greenwood, MS 38935**

On which line in Part 1 did you enter the creditor? **2.16**

Last 4 digits of account number \_\_\_\_

☐

Name, Number, Street, City, State & Zip Code

**Wade, Inc.**

**3000 Highway 82 E**

**Greenville, MS 38704**

On which line in Part 1 did you enter the creditor? **2.16**

Last 4 digits of account number \_\_\_\_

**Fill in this information to identify your case:**

Debtor 1	<b>James Edward Mills</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Sarah Rebecca Mills</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF MISSISSIPPI		
Case number (if known)	16-14011		

☐ Check if this is an amended filing

Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

**1. Do any creditors have priority unsecured claims against you?**

☐ No. Go to Part 2.

☒ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	<b>Internal Revenue Service</b> Priority Creditor's Name <b>100 West Capitol Street</b> <b>Stop 18</b> <b>Jackson, MS 39269</b> Number Street City State Zip Code	Last 4 digits of account number	\$6,000.00	\$0.00
	When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			\$6,000.00
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**2006 & 2007 tax liability**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

2.2	<b>MS Department of Revenue</b> Priority Creditor's Name <b>Bankruptcy Section</b> <b>P.O. Box 22808</b> <b>Jackson, MS 39225</b> Number Street City State Zip Code	Last 4 digits of account number _____ <b>\$16,000.00</b>	<b>\$16,000.00</b>	<b>\$0.00</b>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ <b>Tax liability</b>		

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1	<b>Ag Resource Management, LLC</b> Nonpriority Creditor's Name <b>P.O. Box 568</b> <b>Rayville, LA 71269</b> Number Street City State Zip Code	Last 4 digits of account number _____ <b>\$135,572.45</b>	<b>\$135,572.45</b>	<b>Total claim</b>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <b>Open account</b> <input checked="" type="checkbox"/> Other. Specify <b>Business debt</b>		



Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.2	<b>Ag Resource Management, LLC</b> Nonpriority Creditor's Name <b>P.O. Box 568</b> <b>Rayville, LA 71269</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____ <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Open account Business debt</b>	<b>\$12,457.65</b>
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4.3	<b>AT&amp;T</b> Nonpriority Creditor's Name <b>P.O. Box 5014</b> <b>Carol Stream, IL 60197</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <b>4985</b> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Services</b>	<b>\$1,264.14</b>
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4.4	<b>Capital One</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>Po Box 30258</b> <b>Salt Lake City, UT 84130</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <b>4117</b> <b>When was the debt incurred?</b> <b>Opened 05/07 Last Active 7/24/14</b> <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$795.00</b>
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Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.5	<b>Convenient Care Clinic, PLLC</b> Nonpriority Creditor's Name <b>555 Highway 6 East</b> <b>Batesville, MS 38606</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>2511</u> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>medical services</u>	<b>\$38.24</b>
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4.6	<b>Crabtree Manufacturing, Inc.</b> Nonpriority Creditor's Name <b>970 S. Industrial Parkway</b> <b>Yazoo City, MS 39194</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____ <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Open account Business debt</u>	<b>\$1,980.84</b>
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4.7	<b>Crowder Auto Parts</b> Nonpriority Creditor's Name <b>P.O. Box 98</b> <b>Crowder, MS 38622</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>760</u> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Open account Business debt</u>	<b>\$6,202.64</b>
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Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.8	<b>Debra Goodwin, CPA</b> Nonpriority Creditor's Name <b>P.O. Box 423</b> <b>409 West Cypress Street</b> <b>Charleston, MS 38921</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes	Last 4 digits of account number <b>LLS1</b> <span style="float: right;"><b>\$5,000.00</b></span> When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <p style="text-align: center;"><b>accounting Services</b></p> <input checked="" type="checkbox"/> Other. Specify <b>Business debt</b>
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4.9	<b>Deere &amp; Company</b> Nonpriority Creditor's Name <b>c/o Les Alvis</b> <b>P.O. Box 1836</b> <b>Tupelo, MS 38802</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes	Last 4 digits of account number _____ <span style="float: right;"><b>\$0.00</b></span> When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Notice only</b>
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4.10	<b>Delta Drilling of Tunica</b> Nonpriority Creditor's Name <b>P.O. Box 2666</b> <b>1645 Old Highway 61 S</b> <b>Tunica, MS 38676</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes	Last 4 digits of account number _____ <span style="float: right;"><b>\$507.50</b></span> When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <p style="text-align: center;"><b>Services</b></p> <input checked="" type="checkbox"/> Other. Specify <b>Business debt</b>
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Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.1 1	<b>Delta Regional Medical Center</b> Nonpriority Creditor's Name <b>P.O. Box 5247</b> <b>Greenville, MS 38704</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>5061</b> When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>medical services</b>	<b>\$2,979.80</b>
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4.1 2	<b>Department of the Treasury</b> Nonpriority Creditor's Name <b>3700 East West Highway</b> <b>Hyattsville, MD 20782</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>925A</b> When was the debt incurred? <b>Opened 2/21/15 Last Active 7/28/15</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Government Fee For Service</b>	<b>\$1,248.00</b>
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4.1 3	<b>Dowdle Gas</b> Nonpriority Creditor's Name <b>11604 Highway 6 W</b> <b>Batesville, MS 38606</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Services</b>	<b>\$42.27</b>
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Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.1  
4

**Farmers Incorporated CO-OP**

Nonpriority Creditor's Name

**P.O. Box 5187**

**Greenville, MS 38704**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$6,000.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

**supplies**

☒ Other. Specify **business debt**

4.1  
5

**First Collection Service**

Nonpriority Creditor's Name

**10925 Otter Creek E Blvd.**

**Po Box 3564**

**Mabelvale, AR 72203**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**1124**

**\$2,701.00**

When was the debt incurred?

**Opened 07/15**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Collection Attorney Southern Bancorp**

4.1  
6

**Gaston CPA Firm**

Nonpriority Creditor's Name

**P.O. Box 638**

**Clarksdale, MS 38614**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**300B**

**\$2,025.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Services Business debt**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.1 7	<b>Gaston CPA Firm</b> Nonpriority Creditor's Name <b>P.O. Box 638</b> <b>Clarksdale, MS 38614</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>4530</u> <span style="float: right;"><b>\$5,590.00</b></span> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Services</u>
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4.1 8	<b>Gaston CPA Firm</b> Nonpriority Creditor's Name <b>P.O. Box 638</b> <b>Clarksdale, MS 38614</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>520B</u> <span style="float: right;"><b>\$2,025.00</b></span> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Services</u>
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4.1 9	<b>Geico</b> Nonpriority Creditor's Name <b>One Geico Plaza</b> <b>Bethesda, MD 20811</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>6787</u> <span style="float: right;"><b>\$153.00</b></span> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Insurance</u>
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Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.2  
0

**Greenpoint Ag, LLC**

Nonpriority Creditor's Name

**P.O. Drawer B  
Marks, MS 38646**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number

**\$50,335.59**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Open account Business debt**

4.2  
1

**IC Systems, Inc.**

Nonpriority Creditor's Name

**444 Highway 96 East  
St Paul, MN 55127**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number

**9077**

**\$348.00**

**When was the debt incurred?**

**Opened 05/16**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Collection Attorney Directv**

4.2  
2

**Jeff D. Rawlings**

Nonpriority Creditor's Name

**Attorney at Law  
Post Office Box 1789  
Madison, MS 39130**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number

**\$0.00**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **NOTICE ONLY**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.2 3	<b>Jefferson Capital Systems, LLC</b> Nonpriority Creditor's Name <b>16 Mcleland Rd</b> <b>Saint Cloud, MN 56303</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>5003</b> <span style="float: right;"><b>\$393.00</b></span> When was the debt incurred? <b>Opened 03/16</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Factoring Company Account Fingerhut Direct Mrktng</b>
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4.2 4	<b>Jessie L. Mills</b> Nonpriority Creditor's Name <b>3015 Sonnyman Road</b> <b>Lambert, MS 38643</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <span style="float: right;"><b>\$15,000.00</b></span> When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>loan business debt</b>
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4.2 5	<b>Law Office of David W. Edwards, PC</b> Nonpriority Creditor's Name <b>1410 Industrial Park Road, Suite 101</b> <b>P.O. Box 910</b> <b>Paris, TN 38242-0458</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <span style="float: right;"><b>\$15,983.16</b></span> When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection for BMH-North MS</b>
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Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.2  
6

**M&M Air Services, Inc.**

Nonpriority Creditor's Name

**150 Juanita Drive  
Lambert, MS 38643**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$1,730.20**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

**Services**

**Business debt**

4.2  
7

**Monsanto Company**

Nonpriority Creditor's Name

**P.O. Box 204070  
Dallas, TX 75320**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$50,782.65**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

**Seed Financing**

**Business debt**

4.2  
8

**Mscb, Inc.**

Nonpriority Creditor's Name

**Po Box 1567  
Paris, TN 38242**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**1082**

**\$2,470.00**

When was the debt incurred?

**Opened 06/15**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

**Collection Attorney Yalobusha Gen Hosp**

**Rg**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.2  
9

**Mscb, Inc.**

Nonpriority Creditor's Name

**Po Box 1567  
Paris, TN 38242**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **3468**

**\$1,560.00**

When was the debt incurred? **Opened 10/15**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Collection Attorney Bmh-North Ms Anesthesia**

4.3  
0

**NCO Financial Systems**

Nonpriority Creditor's Name

**P.O. Box 15630  
Dept. 99  
Wilmington, DE 19850**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **1385**

**\$381.95**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Collection for Regions Bank Business debt**

4.3  
1

**Northland Group Inc.**

Nonpriority Creditor's Name

**P. O. Box 390846  
Edina, MN 55439**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **5717**

**\$919.37**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Collection for Capital One**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.3 2	<b>PHI Financial Services, Inc.</b> Nonpriority Creditor's Name <b>P.O. Box 660635</b> <b>Dallas, TX 75266</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>5569</u> <b>\$83,667.21</b> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <b>Seed purchases</b> <input checked="" type="checkbox"/> Other. Specify <u>Business debt</u>
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4.3 3	<b>Portfolio Recovery Associates</b> Nonpriority Creditor's Name <b>Po Box 41067</b> <b>Norfolk, VA 23541</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>5717</u> <b>\$919.00</b> <b>When was the debt incurred?</b> <u>Opened 04/16</u> <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Factoring Company Account Hsbc Bank Nevada N.A.</u>
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4.3 4	<b>ProAg</b> Nonpriority Creditor's Name <b>P.O. Box 975034</b> <b>Dallas, TX 75397</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>1455</u> <b>\$2,303.00</b> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Insurance</u>
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Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.3  
5

**Professional Account Services, Inc.**

Nonpriority Creditor's Name

**P.O. Box 188**

**Brentwood, TN 37024**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$5,217.89**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Collection for Merit Health Batesville**

4.3  
6

**Rankin Oil Company**

Nonpriority Creditor's Name

**1505 State Street**

**Clarksdale, MS 38614**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$16,364.02**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Open account Business debt**

4.3  
7

**RMJ Logistics**

Nonpriority Creditor's Name

**P.O. Box 190009**

**San Antonio, TX 78220**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**424**

**\$2,000.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

**Services**

☒ Other. Specify **Business debt**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.3  
8

**Russell Gentry**

Nonpriority Creditor's Name

**c/o The Rebel**  
**1218 Martin Luther King Drive**  
**Marks, MS 38646**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Notice**

4.3  
9

**Scott Petroleum**

Nonpriority Creditor's Name

**102 Main Street**  
**Itta Bena, MS 38941**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No

Last 4 digits of account number

**2766**

**\$63,280.22**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

**Open account**

☒ Other. Specify **Business debt**

4.4  
0

**Smith Rouchin & Associates**

Nonpriority Creditor's Name

**Sra**  
**1456 Ellis Ave**  
**Jackson, MS 39204**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**5938**

**\$345.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Radiology Associates Of Oxford**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.4  
1

**Smith Rouchin & Associates**

Nonpriority Creditor's Name

**Sra**  
**1456 Ellis Ave**  
**Jackson, MS 39204**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **8451**

**\$341.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Jackson Radiology Assoc**

4.4  
2

**SmithTech**

Nonpriority Creditor's Name

**1315 Industrial Park Dr.**  
**Clarksdale, MS 38614**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$940.53**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Open account**

4.4  
3

**SmithTech**

Nonpriority Creditor's Name

**1315 Industrial Park Drive**  
**Clarksdale, MS 38614**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$891.03**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Open account**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.4  
4

**SmithTech**

Nonpriority Creditor's Name

**1315 Industrial Park Drive  
Clarksdale, MS 38614**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number

**\$40.48**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Open account**

4.4  
5

**Tallahatchie Valley Electric Power Assoc**

Nonpriority Creditor's Name

**Post Office Box 513  
Batesville, MS 38606**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number

**4007**

**\$117.35**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Disconnected Utility Bill Business debt**

4.4  
6

**Tannehill, Carmean & McKenzie**

Nonpriority Creditor's Name

**Attorneys at Law  
829 North Lamar Blvd., Suite 1  
Oxford, MS 38655**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

**Is the claim subject to offset?**

☒ No

☐ Yes

Last 4 digits of account number

**5585**

**\$2,787.00**

**When was the debt incurred?** **Opened 07/11 Last Active 8/14/12**

**As of the date you file, the claim is:** Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Collection Attorney Oxford Surgical Clinic**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.4  
7

**The Rebel**

Nonpriority Creditor's Name  
**1218 Martin Luther King Drive  
Marks, MS 38646**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No

☐ Yes

Last 4 digits of account number

**\$1,500.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

**fuel**

☒ Other. Specify **BUSINESS DEBT**

4.4  
8

**The Strong Heart Clinic**

Nonpriority Creditor's Name  
**2209 Jefferson Davis Dr.  
Oxford, MS 38655**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No

☐ Yes

Last 4 digits of account number

**0791**

**\$30.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **medical services**

4.4  
9

**Tractors & Equipment, Inc.**

Nonpriority Creditor's Name  
**1985 Highway 304 W  
Hernando, MS 38632**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No

☐ Yes

Last 4 digits of account number

**S011**

**\$25,263.96**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Open account  
Business debt**



Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.5  
0

**U.S. Securities & Exchange Commission**

Nonpriority Creditor's Name  
**Atlanta Regional Office**  
**950 East Paces Ferry Road, N.E.,**  
**Suite 9**  
**Atlanta, GA 30326**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number

**Unknown**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **notice**

4.5  
1

**Warrington Clinic**

Nonpriority Creditor's Name  
**1024 Martin Luther King Drive**  
**Marks, MS 38646**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **8689**

**\$90.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **medical services**

4.5  
2

**Wexford & James, LLC**

Nonpriority Creditor's Name  
**2910 Westown Parkway, Suite 102**  
**West Des Moines, IA 50266**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
Is the claim subject to offset?  
☒ No  
☐ Yes

Last 4 digits of account number **5502**

**\$2,043.51**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Type of NONPRIORITY unsecured claim:  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Collection for AgriLogic Insurance Services Business debt**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

4.5  
3

**Whitten Insurance Agency**

Nonpriority Creditor's Name

**283 Highway 6 W  
Batesville, MS 38606**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **6208**

**\$1,526.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Insurance Business debt**

4.5  
4

**Whitten Insurance Agency**

Nonpriority Creditor's Name

**283 Highway 6 W  
Batesville, MS 38606**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **6207**

**\$511.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Insurance Business debt**

4.5  
5

**Whitten Insurance Agency**

Nonpriority Creditor's Name

**283 Highway 6 W  
Batesville, MS 38606**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$32,292.89**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Insurance Business debt**

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**Accounts Receivable Management Services**  
**P.O. Box 638**  
**Paris, TN 38242-0638**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Ag Resource Management**  
**201 E. Sunflower Road, Suite 10**  
**Cleveland, MS 38732**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**AgriLogic Insurance Services**  
**c/o Wexford & James, LLC**  
**2910 Westown Parkway, Suite 102**  
**West Des Moines, IA 50266**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.52** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Baptist Memorial Hospital-North MS**  
**P.O. Box 946**  
**Oxford, MS 38655**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.29** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Baptist Memorial Hospital-North MS**  
**P.O. Box 946**  
**Oxford, MS 38655**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Capital One**  
**Post Office Box 26625**  
**Richmond, VA 23261**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Capital One**  
**Bankruptcy Department**  
**P.O. Box 85167**  
**Richmond, VA 23285**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Capital One**  
**P.O. Box 85520**  
**Richmond, VA 23285**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Capital One**  
**P.O. Box 30285**  
**Salt Lake City, UT 84130**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Capital One**  
**P.O. Box 85520**  
**Richmond, VA 23285**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Capital One**  
**Bankruptcy Department**  
**P.O. Box 85167**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

**Richmond, VA 23285**

Last 4 digits of account number

Name and Address

**Capital One**  
**P.O. Box 30285**  
**Salt Lake City, UT 84130**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Convenient Care Clinic, PLLC**  
**P.O. Box 671478**  
**Dallas, TX 75267**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Credit Collection Services**  
**P.O. Box 607**  
**Norwood, MA 02062**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.19** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Deere & Company**  
**Post Office Box 6600**  
**Johnston, IA 50131**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.9** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Delta Regional Medical Center**  
**1400 East Union Street**  
**Greenville, MS 38703**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Delta Regional Medical Center**  
**P.O. Box 1707**  
**Greenville, MS 38702**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Directv**  
**P.O. Box 78626**  
**Phoenix, AZ 85062**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Directv**  
**P.O. Box 6550**  
**Greenwood Village, CO 80155-6550**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Fingerhut**  
**Collections Department**  
**P.O. Box 1250**  
**Saint Cloud, MN 56395**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.23** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Fingerhut**  
**6250 Ridgewood Road**  
**Saint Cloud, MN 56303**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.23** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Healthcare Financial Services**  
**911 Flynt Drive**  
**Flowood, MS 39232**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

Name and Address  
**Healthcare Financial Services, LLC**  
**P.O. Box 320309**  
**Jackson, MS 39232**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**HSBC Card Services**  
**P.O. Box 80084**  
**Salinas, CA 93912-0084**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.33** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**IC System, Inc.**  
**P.O. Box 64378**  
**Saint Paul, MN 55164**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Internal Revenue Service**  
**c/o US Attorney**  
**900 Jefferson Avenue**  
**Oxford, MS 38655**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **2.1** of (Check one):

☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Internal Revenue Service**  
**P.O. Box 7346**  
**Philadelphia, PA 19101-7346**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **2.1** of (Check one):

☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Jackson Radiology Assoc., PA**  
**1860 Chadwick Drive, Suite 204**  
**Jackson, MS 39204**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.41** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Jackson Radiology Associates**  
**c/o Smith, Rouchon & Associates,**  
**Inc.**  
**1456 Ellis Avenue**  
**Jackson, MS 39204-2204**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.41** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Jason Patrick**  
**Attorney at Law**  
**P.O. Box 2189**  
**Montgomery, AL 36102**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**L. Bradley Dillard**  
**Attorney at Law**  
**P.O. Box 7120**  
**Tupelo, MS 38802**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Merit Health Batesville**  
**303 Medical Center Drive**  
**Batesville, MS 38606**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.35** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Merit Health Batesville**  
**P.O. Box 741666**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.35** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

**Atlanta, GA 30374**

Last 4 digits of account number

Name and Address

**Midsouth Crop Insurance, Inc.**  
**189 Jeff Sanders Road**  
**Batesville, MS 38606**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.34** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Monsanto, Inc.**  
**c/o Parnell & Crum, PA**  
**P.O. Box 2189**  
**Montgomery, AL 36102**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**MSCB**  
**1410 Industrial Park Road**  
**Paris, TN 38242**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.29** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**NCO Financial Systems**  
**P.O. Box 15740**  
**Wilmington, DE 19850-5740**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**NCO Financial Systems**  
**507 Prudential Road**  
**Horsham, PA 19044**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Oxford Surgical & Bariatric Clinic,**  
**PLLC**  
**P.O. Box 590**  
**Oxford, MS 38655**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Performant Recovery, Inc.**  
**P.O. Box 9054**  
**Pleasanton, CA 94566**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**PHI Financial Services, Inc.**  
**c/o Abendroth & Russell, PC**  
**2560 73rd Street**  
**Des Moines, IA 50322**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.32** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Portfolio Recovery & Associates**  
**120 Corporate Blvd., Suite 1**  
**Norfolk, VA 23502**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.33** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Radiology Associates of Oxford,**  
**P.A.**  
**P.O. Box 55449**  
**Jackson, MS 39296**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.40** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Regions Bank**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if know) **16-14011**

**c/o NCO Financial Systems, Inc.**  
**507 Prudential Road**  
**Horsham, PA 19044**

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Scott Petroleum Corporation**  
**3239 Highway 82 East**  
**Greenville, MS 38703**

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line **4.39** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Southern Bancorp**  
**Post Office Box 248**  
**Arkadelphia, AR 71923**

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line **4.15** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Southwest Credit Systems, LP**  
**4120 International Pkwy., Suite 1100**  
**Carrollton, TX 75007**

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line **4.30** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Yalobusha General Hospital**  
**P.O. Box 728**  
**Water Valley, MS 38965**

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line **4.28** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	\$ <u>22,000.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ <u>22,000.00</u>
		Total Claim	
Total claims from Part 2	6f. Student loans	6f.	\$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ <u>568,957.54</u>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ <u>568,957.54</u>

**Fill in this information to identify your case:**

Debtor 1	<b>James Edward Mills</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Sarah Rebecca Mills</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF MISSISSIPPI		
Case number (if known)	16-14011		

☐ Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease <small>Name, Number, Street, City, State and ZIP Code</small>	State what the contract or lease is for
2.1	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.2	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.3	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.4	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.5	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	



**Fill in this information to identify your case:**

Debtor 1	<b>James Edward Mills</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Sarah Rebecca Mills</b>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF MISSISSIPPI		
Case number	<b>16-14011</b>		
(if known)			

☐ Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

**Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.**

**1. Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☒ No  
☐ Yes

**2. Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

- ☒ No. Go to line 3.  
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

**3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

**Column 1: Your codebtor**

Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

**3.1**

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

- ☐ Schedule D, line \_\_\_\_\_  
☐ Schedule E/F, line \_\_\_\_\_  
☐ Schedule G, line \_\_\_\_\_

**3.2**

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

- ☐ Schedule D, line \_\_\_\_\_  
☐ Schedule E/F, line \_\_\_\_\_  
☐ Schedule G, line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1 James Edward Mills

Debtor 2 Sarah Rebecca Mills  
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF MISSISSIPPI

Case number 16-14011  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

		Debtor 1	Debtor 2 or non-filing spouse
<b>1. Fill in your employment information.</b>  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.	<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed
	<b>Occupation</b>	<u>Manager</u>	<u>Unemployed</u>
	<b>Employer's name</b>	<u>Jim Newsom Farms, Inc.</u>	
	<b>Employer's address</b>	<u>P.O. Box 450</u> <u>Glen Allan, MS 38744</u>	
	<b>How long employed there?</b>	<u>1 1/2 years</u>	

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>3,400.00</u>	\$ <u>0.00</u>
3. <b>Estimate and list monthly overtime pay.</b>	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. <b>Calculate gross income.</b> Add line 2 + line 3.	4. \$ <u>3,400.00</u>	\$ <u>0.00</u>

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ <b>3,400.00</b>	\$ <b>0.00</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <b>850.00</b>	\$ <b>0.00</b>
5b. Mandatory contributions for retirement plans	5b. \$ <b>0.00</b>	\$ <b>0.00</b>
5c. Voluntary contributions for retirement plans	5c. \$ <b>0.00</b>	\$ <b>0.00</b>
5d. Required repayments of retirement fund loans	5d. \$ <b>0.00</b>	\$ <b>0.00</b>
5e. Insurance	5e. \$ <b>0.00</b>	\$ <b>0.00</b>
5f. Domestic support obligations	5f. \$ <b>0.00</b>	\$ <b>0.00</b>
5g. Union dues	5g. \$ <b>0.00</b>	\$ <b>0.00</b>
5h. Other deductions. Specify:	5h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <b>850.00</b>	\$ <b>0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. \$ <b>2,550.00</b>	\$ <b>0.00</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <b>0.00</b>	\$ <b>0.00</b>
8b. Interest and dividends	8b. \$ <b>0.00</b>	\$ <b>0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <b>0.00</b>	\$ <b>0.00</b>
8d. Unemployment compensation	8d. \$ <b>0.00</b>	\$ <b>0.00</b>
8e. Social Security	8e. \$ <b>0.00</b>	\$ <b>0.00</b>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ <b>0.00</b>	\$ <b>0.00</b>
8g. Pension or retirement income	8g. \$ <b>0.00</b>	\$ <b>0.00</b>
8h. Other monthly income. Specify:	8h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <b>0.00</b>	\$ <b>0.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <b>2,550.00</b> + \$ <b>0.00</b>	= \$ <b>2,550.00</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		
	11. +\$	<b>0.00</b>
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$	<b>2,550.00</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b> <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain:		

**Combined monthly income**

Fill in this information to identify your case:

Debtor 1 James Edward Mills

Debtor 2 Sarah Rebecca Mills  
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF MISSISSIPPI

Case number 16-14011  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son

14

☐ No

☒ Yes

Son

17

☐ No

☒ Yes

☐ No

☐ Yes

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 816.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 58.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 100.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 200.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

<b>6. Utilities:</b>		
6a. Electricity, heat, natural gas	6a. \$	<b>450.00</b>
6b. Water, sewer, garbage collection	6b. \$	<b>40.00</b>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<b>250.00</b>
6d. Other. Specify: _____	6d. \$	<b>0.00</b>
<b>7. Food and housekeeping supplies</b>	7. \$	<b>600.00</b>
<b>8. Childcare and children's education costs</b>	8. \$	<b>0.00</b>
<b>9. Clothing, laundry, and dry cleaning</b>	9. \$	<b>200.00</b>
<b>10. Personal care products and services</b>	10. \$	<b>75.00</b>
<b>11. Medical and dental expenses</b>	11. \$	<b>400.00</b>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<b>300.00</b>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$	<b>125.00</b>
<b>14. Charitable contributions and religious donations</b>	14. \$	<b>0.00</b>
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<b>0.00</b>
15b. Health insurance	15b. \$	<b>0.00</b>
15c. Vehicle insurance	15c. \$	<b>235.00</b>
15d. Other insurance. Specify: _____	15d. \$	<b>0.00</b>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <b>Car tag</b>		
	16. \$	<b>2.50</b>
<b>17. Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$	<b>200.00</b>
17b. Car payments for Vehicle 2	17b. \$	<b>0.00</b>
17c. Other. Specify: _____	17c. \$	<b>0.00</b>
17d. Other. Specify: _____	17d. \$	<b>0.00</b>
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>		
	18. \$	<b>0.00</b>
<b>19. Other payments you make to support others who do not live with you.</b>		
	\$	<b>0.00</b>
Specify: _____		
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$	<b>0.00</b>
20b. Real estate taxes	20b. \$	<b>0.00</b>
20c. Property, homeowner's, or renter's insurance	20c. \$	<b>0.00</b>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<b>0.00</b>
20e. Homeowner's association or condominium dues	20e. \$	<b>0.00</b>
<b>21. Other:</b> Specify: <b>School expenses</b>	21. +\$	<b>567.00</b>
<b>22. Calculate your monthly expenses</b>		
22a. Add lines 4 through 21.	\$	<b>4,618.50</b>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	<b>4,618.50</b>
<b>23. Calculate your monthly net income.</b>		
23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.	23a. \$	<b>2,550.00</b>
23b. Copy your monthly expenses from line 22c above.	23b. -\$	<b>4,618.50</b>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	<b>-2,068.50</b>
<b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain here: _____		

**Fill in this information to identify your case:**

Debtor 1 **James Edward Mills**  
First Name Middle Name Last Name

Debtor 2 **Sarah Rebecca Mills**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **16-14011**  
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X **/s/ James Edward Mills**  
**James Edward Mills**  
Signature of Debtor 1

Date **November 25, 2016**

X **/s/ Sarah Rebecca Mills**  
**Sarah Rebecca Mills**  
Signature of Debtor 2

Date **November 25, 2016**

**Fill in this information to identify your case:**

Debtor 1 **James Edward Mills**  
First Name Middle Name Last Name

Debtor 2 **Sarah Rebecca Mills**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **16-14011**  
(if known)

☐ Check if this is an amended filing

**Official Form 107**

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before**

**1. What is your current marital status?**

- ☒ Married  
☐ Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1  
lived there

Debtor 2 Prior Address:

Dates Debtor 2  
lived there

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.*)

- ☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

**Part 2 Explain the Sources of Your Income**

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No  
☒ Yes. Fill in the details.

**From January 1 of current year until the date you filed for bankruptcy:**

**Debtor 1**

**Sources of income**  
Check all that apply.

**Gross income**  
(before deductions and exclusions)

☒ Wages, commissions, bonuses, tips

☐ Operating a business

**\$35,152.50**

**Debtor 2**

**Sources of income**  
Check all that apply.

**Gross income**  
(before deductions and exclusions)

☒ Wages, commissions, bonuses, tips

☐ Operating a business

**\$800.00**

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Sources of income Check all that apply.
	Gross income (before deductions and exclusions)	Gross income (before deductions and exclusions)
<b>For last calendar year: (January 1 to December 31, 2015 )</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business
	<b>\$10,000.00</b>	<b>\$0.00</b>
<b>For the calendar year before that: (January 1 to December 31, 2014 )</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	<b>\$0.00</b>	<b>\$0.00</b>

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1	Debtor 2
Sources of income Describe below.	Sources of income Describe below.
Gross income from each source (before deductions and exclusions)	Gross income (before deductions and exclusions)

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☒ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

- ☐ No. Go to line 7.  
☒ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.  
☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
<b>Southern Bancorp</b> <b>875 South State Street</b> <b>P.O. Box 1825</b> <b>Clarksdale, MS 38614</b>	<b>Monthly</b>	<b>\$816.00</b>	<b>\$48,106.50</b>	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other__



Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**Case number (if known) **16-14011**7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☒ No  
☐ Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No  
☐ Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
----------------------------	------------------	-------------------	----------------------	--

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No  
☒ Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
<b>Monsanto Company vs. James E. Mills 2015-0002</b>	<b>Collection</b>	<b>Circuit Court of Quitman County 220 Chestnut Street, Suite 4 Marks, MS 38646</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<b>AG Resource Management, LLC vs. MSM Farms Dirt Moving, LLC and James E. Mills 2014-0016</b>	<b>Collection</b>	<b>Circuit Court of Quitman County 220 Chestnut Street, Suite 4 Marks, MS 38646</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded  <b>Judgment</b>
<b>Greenpoint Ag, LLC vs. James Mills &amp; MSM Farms CV2014-150-GCP2</b>	<b>Collection</b>	<b>Circuit Court of Panola County Batesville, MS 38606</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded  <b>Judgment</b>

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

- ☐ No. Go to line 11.  
☒ Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
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Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

Creditor Name and Address	Describe the Property	Date	Value of the property
<b>Southern Bancorp</b> <b>875 South State Street</b> <b>P.O. Box 1825</b> <b>Clarksdale, MS 38614</b>	<b>Explain what happened</b> <b>Farm Equipment</b>  <input checked="" type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.	<b>11/2016</b>	<b>Unknown</b>
<b>MS Department of Revenue</b> <b>Bankruptcy Section</b> <b>P.O. Box 22808</b> <b>Jackson, MS 39225</b>	<b>checking account</b>  <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input checked="" type="checkbox"/> Property was attached, seized or levied.	<b>8/2016</b>	<b>\$380.00</b>

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No  
☐ Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No  
☐ Yes

**Part 5: List Certain Gifts and Contributions**

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
<b>Person to Whom You Gave the Gift and Address:</b>			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No  
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Dates you contributed	Value
<b>Charity's Name</b> <b>Address (Number, Street, City, State and ZIP Code)</b>			

**Part 6: List Certain Losses**

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No  
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		

Debtor 1 **James Edward Mills**  
 Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011****Part 7: List Certain Payments or Transfers**

16. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**  
 Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No  
☒ Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
John Michael Sherman Post Office Box 1900 Clarksdale, MS 38614	\$335.00- Court cost \$53.00- Joint credit report \$2,500.00- Attorney fees	11/11/16 11/25/16	\$2,888.00

17. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**  
 Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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18. **Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**  
 Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
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19. **Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)**

- ☒ No  
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
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Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

**Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☐ No

☒ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Southern Bancorp 875 South State Street P.O. Box 1825 Clarksdale, MS 38614	XXXX-	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	08/2016	\$0.00

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☒ No

☐ Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☒ No

☐ Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☒ No

☐ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
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**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- ☒ **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☒ **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☒ **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
<b>MSM Farms Dirt Moving, LLC</b> 3337 Tocowa Road Courtland, MS 38620	<b>Dirt Movers</b>  Debra Goodwin	EIN: 20-1651683  From-To 9/16/2004 -2013
<b>C M Trucking, LLC</b> 3015 Sonnyman Road Lambert, MS 38643	<b>Trucking business</b>  Debra Goodwin	EIN: unknown  From-To 6/8/2009-12/5/2011
<b>3M Farm, LLC</b> 3337 Tocowa Road Courtland, MS 38620	<b>Farming operation</b>  Sarah Mills	EIN: 47-3091848  From-To 2/9/15-2016
<b>James Mills</b> dba The Duck Blind	<b>Bar</b>  Sarah Mills	EIN:  From-To 08/2015 - 06/2016

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Name

Address

(Number, Street, City, State and ZIP Code)

Date Issued

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ James Edward Mills

James Edward Mills  
Signature of Debtor 1

/s/ Sarah Rebecca Mills

Sarah Rebecca Mills  
Signature of Debtor 2

Date November 25, 2016

Date November 25, 2016

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No  
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No  
☐ Yes. Name of Person \_\_\_\_\_. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1 **James Edward Mills**  
First Name Middle Name Last Name

Debtor 2 **Sarah Rebecca Mills**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **16-14011**  
(if known)

☐ Check if this is an amended filing

## Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☒ creditors have claims secured by your property, or
- ☒ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <b>ARM Ag Resource Management</b>	<input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <b>Equipment (Abandon) Business debt Judgment</b>		
Creditor's name: <b>GreenPoint Ag, LLC</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: <b>avoid lien using 11 U.S.C. § 522(f)</b>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt: <b>Judgment Business debt</b>		
Creditor's name: <b>Healthcare Financial Services</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property: <b>Judgment</b>		



Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

securing debt: **avoid lien using 11 U.S.C. § 522(f)**

Creditor's name: **Internal Revenue Service**

Description of property securing debt: **federal tax lien**

- ☐ Surrender the property.  
☐ Retain the property and redeem it.  
☒ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

☐ No  
☒ Yes

Creditor's name: **MS Department of Revenue**

Description of property securing debt: **state tax lien**

- ☐ Surrender the property.  
☐ Retain the property and redeem it.  
☒ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

☐ No  
☒ Yes

Creditor's name: **Southern Bancorp**

Description of property securing debt: **2012 Ford F-150 (Abandon)  
Business debt**

- ☒ Surrender the property.  
☐ Retain the property and redeem it.  
☐ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

☒ No  
☐ Yes

Creditor's name: **Southern Bancorp**

Description of property securing debt: **Farm Equipment (Abandon)  
Business debt**

- ☒ Surrender the property.  
☐ Retain the property and redeem it.  
☐ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

☒ No  
☐ Yes

Creditor's name: **Southern Bancorp**

Description of property securing debt: **Farm Equipment (Abandon)  
Business debt**

- ☒ Surrender the property.  
☐ Retain the property and redeem it.  
☐ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

☒ No  
☐ Yes

Creditor's name: **Southern Bancorp**

Description of property securing debt: **Farm Equipment (Abandon)  
Business debt**

- ☒ Surrender the property.  
☐ Retain the property and redeem it.  
☐ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

☒ No  
☐ Yes

Creditor's name: **Southern Bancorp**

- ☐ Surrender the property.

☒ No

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

name: ☐ Retain the property and redeem it. ☐ Yes

Description of **3 Mobile homes & land**  
property  
securing debt: ☒ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

Creditor's **Southern Bancorp**  
name: ☐ Surrender the property. ☐ No  
☐ Retain the property and redeem it.

Description of **House & 18 acres**  
property  
securing debt: ☒ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

Creditor's **Southern Bancorp**  
name: ☒ Surrender the property. ☒ No  
☐ Retain the property and redeem it.

Description of **2007 9520 John Deere Tractor**  
property **2009 9630 John Deere Tractor**  
securing debt: ☐ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

Creditor's **Stanley Auto Sales**  
name: ☐ Surrender the property. ☐ No  
☐ Retain the property and redeem it.

Description of **2003 Nissan Altima**  
property  
securing debt: ☒ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

Creditor's **Tower Loan of Batesville**  
name: ☒ Surrender the property. ☒ No  
☐ Retain the property and redeem it.

Description of **2000 Chevrolet Dually**  
property **(Abandon)**  
securing debt: **Household goods** ☐ Retain the property and enter into a *Reaffirmation Agreement*.  
☐ Retain the property and [explain]:

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	<input type="checkbox"/> No
Description of leased Property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased Property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No

Debtor 1 **James Edward Mills**  
Debtor 2 **Sarah Rebecca Mills**

Case number (if known) **16-14011**

Description of leased  
Property:

☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No

☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No

☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No

☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No

☐ Yes

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ James Edward Mills

**James Edward Mills**

Signature of Debtor 1

X /s/ Sarah Rebecca Mills

**Sarah Rebecca Mills**

Signature of Debtor 2

Date **November 25, 2016**

Date **November 25, 2016**

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

**You are an individual filing for bankruptcy,**  
and

**Your debts are primarily consumer debts.**  
*Consumer debts* are defined in 11 U.S.C.  
§ 101(8) as "incurred by an individual  
primarily for a personal, family, or  
household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under  
one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan  
for family farmers or  
fishermen

Chapter 13 - Voluntary repayment plan  
for individuals with regular  
income

**You should have an attorney review your  
decision to file for bankruptcy and the choice of  
chapter.**

### Chapter 7: Liquidation

\$245	filing fee
\$75	administrative fee
+	\$15 trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

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## Chapter 11: Reorganization

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	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

#### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### **Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:  
[http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

### **Bankruptcy crimes have serious consequences**

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### **Make sure the court has your mailing address**

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### **Understand which services you could receive from credit counseling agencies**

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:  
[http://justice.gov/ust/eo/hapcpa/ccde/cc\\_approved.html](http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html)

In Alabama and North Carolina, go to:  
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**United States Bankruptcy Court  
Northern District of Mississippi**

In re **James Edward Mills  
Sarah Rebecca Mills**

Debtor(s)

Case No. **16-14011**  
Chapter **7**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- |   |    |                 |
|---|----|-----------------|
| For legal services, I have agreed to accept .....           | \$ | <b>2,500.00</b> |
| Prior to the filing of this statement I have received ..... | \$ | <b>2,500.00</b> |
| Balance Due .....   | \$ | <b>0.00</b>     |
2. \$ **335.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:
- ☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - [Other provisions as needed]  
**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods and judicial lien avoidances.**  
**Representation of the debtor(s) in any relief from stay actions.**
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  
**Representation of the debtor(s) in any dischargeability actions.**  
**Representation of the debtor(s) in any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**November 25, 2016**

*Date*

**/s/ John Michael Sherman**

**John Michael Sherman 8807**

*Signature of Attorney*

**John Michael Sherman**

**Post Office Box 1900**

**Clarksdale, MS 38614**

**662-627-5301 Fax: 662-627-5315**

**jsher203@bellsouth.net**

*Name of law firm*



**United States Bankruptcy Court  
Northern District of Mississippi**

In re **James Edward Mills  
Sarah Rebecca Mills**

Debtor(s)

Case No. **16-14011**  
Chapter **7**

**VERIFICATION OF CREDITOR MATRIX**

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **November 25, 2016**

**/s/ James Edward Mills**

**James Edward Mills**

Signature of Debtor

Date: **November 25, 2016**

**/s/ Sarah Rebecca Mills**

**Sarah Rebecca Mills**

Signature of Debtor

Accounts Receivable Management Services  
P.O. Box 638  
Paris, TN 38242-0638

Ag Resource Management  
201 E. Sunflower Road, Suite 10  
Cleveland, MS 38732

Ag Resource Management, LLC  
P.O. Box 568  
Rayville, LA 71269

Ag Resource Management, LLC  
P.O. Box 568  
Rayville, LA 71269

AgriLogic Insurance Services  
c/o Wexford & James, LLC  
2910 Westown Parkway, Suite 102  
West Des Moines, IA 50266

ARM Ag Resource Management  
P.O. Box 568  
2222 Louisa Street  
Rayville, LA 71269

AT&T  
P.O. Box 5014  
Carol Stream, IL 60197

Baptist Memorial Hospital-North MS  
P.O. Box 946  
Oxford, MS 38655

Baptist Memorial Hospital-North MS  
P.O. Box 946  
Oxford, MS 38655

Capital One  
Attn: Bankruptcy Dept  
Po Box 30258  
Salt Lake City, UT 84130

Capital One  
Post Office Box 26625  
Richmond, VA 23261

Capital One  
Bankruptcy Department  
P.O. Box 85167  
Richmond, VA 23285

Capital One  
P.O. Box 30285  
Salt Lake City, UT 84130

Capital One  
P.O. Box 85520  
Richmond, VA 23285

Capital One  
Bankruptcy Department  
P.O. Box 85167  
Richmond, VA 23285

Capital One  
P.O. Box 30285  
Salt Lake City, UT 84130

Capital One  
P.O. Box 85520  
Richmond, VA 23285

Convenient Care Clinic, PLLC  
555 Highway 6 East  
Batesville, MS 38606

Convenient Care Clinic, PLLC  
P.O. Box 671478  
Dallas, TX 75267

Crabtree Manufacturing, Inc.  
970 S. Industrial Parkway  
Yazoo City, MS 39194

Credit Collection Services  
P.O. Box 607  
Norwood, MA 02062

Crowder Auto Parts  
P.O. Box 98  
Crowder, MS 38622

Debra Goodwin, CPA  
P.O. Box 423  
409 West Cypress Street  
Charleston, MS 38921

Deere & Company  
c/o Les Alvis  
P.O. Box 1836  
Tupelo, MS 38802

Deere & Company  
Post Office Box 6600  
Johnston, IA 50131

Delta Drilling of Tunica  
P.O. Box 2666  
1645 Old Highway 61 S  
Tunica, MS 38676

Delta Regional Medical Center  
P.O. Box 5247  
Greenville, MS 38704

Delta Regional Medical Center  
1400 East Union Street  
Greenville, MS 38703

Delta Regional Medical Center  
P.O. Box 1707  
Greenville, MS 38702

Department of the Treasury  
3700 East West Highway  
Hyattsville, MD 20782

Directv  
P.O. Box 78626  
Phoenix, AZ 85062

Directv  
P.O. Box 6550  
Greenwood Village, CO 80155-6550

Dowdle Gas  
11604 Highway 6 W  
Batesville, MS 38606

Farmers Incorporated CO-OP  
P.O. Box 5187  
Greenville, MS 38704

Fingerhut  
Collections Department  
P.O. Box 1250  
Saint Cloud, MN 56395

Fingerhut  
6250 Ridgewood Road  
Saint Cloud, MN 56303

First Collection Service  
10925 Otter Creek E Blvd.  
Po Box 3564  
Mabelvale, AR 72203

First Security Bank  
P.O. Box 690  
Batesville, MS 38606

Gaston CPA Firm  
P.O. Box 638  
Clarksdale, MS 38614

Gaston CPA Firm  
P.O. Box 638  
Clarksdale, MS 38614

Gaston CPA Firm  
P.O. Box 638  
Clarksdale, MS 38614

Geico  
One Geico Plaza  
Bethesda, MD 20811

GreenPoint Ag, LLC  
16093 Highway 35 S  
Batesville, MS 38606

Greenpoint Ag, LLC  
P.O. Drawer B  
Marks, MS 38646

Healthcare Financial Services  
911 Flynt Drive  
Flowood, MS 39232

Healthcare Financial Services  
911 Flynt Drive  
Flowood, MS 39232

Healthcare Financial Services, LLC  
P.O. Box 320309  
Jackson, MS 39232

Healthcare Financial Services, LLC  
P.O. Box 320309  
Jackson, MS 39232

HSBC Card Services  
P.O. Box 80084  
Salinas, CA 93912-0084

Huron Smith Oil Co., Inc.  
P.O. Box 1569  
Batesville, MS 38606

Huron Smith Oil Co., Inc.  
203 Hays Street  
Batesville, MS 38606

Huron Smith Oil Co., Inc.  
c/o James Andrew Yelton  
Post Office Box 1615  
Batesville, MS 38606

IC System, Inc.  
P.O. Box 64378  
Saint Paul, MN 55164

IC Systems, Inc.  
444 Highway 96 East  
St Paul, MN 55127

Internal Revenue Service  
100 West Capitol Street  
Stop 18  
Jackson, MS 39269

Internal Revenue Service  
100 West Capitol Street  
Stop 18  
Jackson, MS 39269

Internal Revenue Service  
c/o US Attorney  
900 Jefferson Avenue  
Oxford, MS 38655

Internal Revenue Service  
P.O. Box 7346  
Philadelphia, PA 19101-7346

Internal Revenue Service  
c/o US Attorney  
900 Jefferson Avenue  
Oxford, MS 38655

Internal Revenue Service  
P.O. Box 7346  
Philadelphia, PA 19101-7346

Jackson Radiology Assoc., PA  
1860 Chadwick Drive, Suite 204  
Jackson, MS 39204

Jackson Radiology Associates  
c/o Smith, Rouchon & Associates, Inc.  
1456 Ellis Avenue  
Jackson, MS 39204-2204

James Andrew Yelton  
Attorney at Law  
P.O. Drawer 1615  
Batesville, MS 38606

Jason Patrick  
Attorney at Law  
P.O. Box 2189  
Montgomery, AL 36102

Jeff D. Rawlings  
Attorney at Law  
Post Office Box 1789  
Madison, MS 39130

Jefferson Capital Systems, LLC  
16 Mclelland Rd  
Saint Cloud, MN 56303

Jessie L. Mills  
3015 Sonnyman Road  
Lambert, MS 38643

John Tucker  
Attorney at Law  
Post Office Box 320001  
Flowood, MS 39232

L. Bradley Dillard  
Attorney at Law  
P.O. Box 7120  
Tupelo, MS 38802

L. Bradley Dillard  
Attorney at Law  
P.O. Box 7120  
Tupelo, MS 38802

Law Office of David W. Edwards, PC  
1410 Industrial Park Road, Suite 101  
P.O. Box 910  
Paris, TN 38242-0458

M&M Air Services, Inc.  
150 Juanita Drive  
Lambert, MS 38643

Merit Health Batesville  
303 Medical Center Drive  
Batesville, MS 38606



Merit Health Batesville  
P.O. Box 741666  
Atlanta, GA 30374

Midsouth Crop Insurance, Inc.  
189 Jeff Sanders Road  
Batesville, MS 38606

Monsanto Company  
P.O. Box 204070  
Dallas, TX 75320

Monsanto, Inc.  
c/o Parnell & Crum, PA  
P.O. Box 2189  
Montgomery, AL 36102

MS Department of Revenue  
Bankruptcy Section  
P.O. Box 22808  
Jackson, MS 39225

MS Department of Revenue  
Bankruptcy Section  
P.O. Box 22808  
Jackson, MS 39225

MSCB  
1410 Industrial Park Road  
Paris, TN 38242

Mscb, Inc.  
Po Box 1567  
Paris, TN 38242

Mscb, Inc.  
Po Box 1567  
Paris, TN 38242

NCO Financial Systems  
P.O. Box 15630  
Dept. 99  
Wilmington, DE 19850

NCO Financial Systems  
P.O. Box 15740  
Wilmington, DE 19850-5740

NCO Financial Systems  
507 Prudential Road  
Horsham, PA 19044

Northland Group Inc.  
P. O. Box 390846  
Edina, MN 55439

Oxford Surgical & Bariatric Clinic, PLLC  
P.O. Box 590  
Oxford, MS 38655

Performant Recovery, Inc.  
P.O. Box 9054  
Pleasanton, CA 94566

PHI Financial Services, Inc.  
P.O. Box 660635  
Dallas, TX 75266

PHI Financial Services, Inc.  
c/o Abendroth & Russell, PC  
2560 73rd Street  
Des Moines, IA 50322

Portfolio Recovery & Associates  
120 Corporate Blvd., Suite 1  
Norfolk, VA 23502

Portfolio Recovery Associates  
Po Box 41067  
Norfolk, VA 23541

ProAg  
P.O. Box 975034  
Dallas, TX 75397

Professional Account Services, Inc.  
P.O. Box 188  
Brentwood, TN 37024

Radiology Associates of Oxford, P.A.  
P.O. Box 55449  
Jackson, MS 39296

Rankin Oil Company  
1505 State Street  
Clarksdale, MS 38614

Regions Bank  
c/o NCO Financial Systems, Inc.  
507 Prudential Road  
Horsham, PA 19044

RMJ Logistics  
P.O. Box 190009  
San Antonio, TX 78220

Robert G. Johnson  
Attorney at Law  
P.O. Box 1737  
Cleveland, MS 38732

Russell Gentry  
c/o The Rebel  
1218 Martin Luther King Drive  
Marks, MS 38646

Scott Petroleum  
102 Main Street  
Itta Bena, MS 38941

Scott Petroleum Corporation  
3239 Highway 82 East  
Greenville, MS 38703

Smith Rouchin & Associates  
Sra  
1456 Ellis Ave  
Jackson, MS 39204

Smith Rouchin & Associates  
Sra  
1456 Ellis Ave  
Jackson, MS 39204

SmithTech  
1315 Industrial Park Dr.  
Clarksdale, MS 38614

SmithTech  
1315 Industrial Park Drive  
Clarksdale, MS 38614

SmithTech  
1315 Industrial Park Drive  
Clarksdale, MS 38614

Southern Bancorp  
Post Office Box 248  
Arkadelphia, AR 71923

Southern Bancorp  
875 South State Street  
P.O. Box 1825  
Clarksdale, MS 38614

Southern Bancorp  
875 South State Street  
P.O. Box 1825  
Clarksdale, MS 38614

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Clarksdale, MS 38614

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Clarksdale, MS 38614

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c/o Jeff Rawlings  
Attorney at Law  
P.O. Box 1789  
Madison, MS 39130

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Post Office Box 248  
Arkadelphia, AR 71923

Southern Bancorp  
Post Office Box 248  
Arkadelphia, AR 71923

Southern Bancorp  
Post Office Box 906  
Indianola, MS 38751

Southern BAnCorp of MS  
Attn: Bankruptcy  
605 Main Street, Suite 203  
Arkadelphia, AR 71923

Southwest Credit Systems, LP  
4120 International Pkwy., Suite 1100  
Carrollton, TX 75007

Stanley Auto Sales  
615 Highway 6 East  
Batesville, MS 38606

Tallahatchie Valley Electric Power Assoc  
Post Office Box 513  
Batesville, MS 38606

Tannehill, Carmean & McKenzie  
Attorneys at Law  
829 North Lamar Blvd., Suite 1  
Oxford, MS 38655

The Rebel  
1218 Martin Luther King Drive  
Marks, MS 38646

The Strong Heart Clinic  
2209 Jefferson Davis Dr.  
Oxford, MS 38655

Tower Loan  
P.O. Box 320001  
Flowood, MS 39232

Tower Loan  
Bankruptcy Department  
P.O. Box 320367  
Flowood, MS 39232

Tower Loan of Batesville  
P.O. Box 1647  
Batesville, MS 38606

Tractors & Equipment, Inc.  
1985 Highway 304 W  
Hernando, MS 38632

U.S. Securities & Exchange Commission  
Atlanta Regional Office  
950 East Paces Ferry Road, N.E., Suite 9  
Atlanta, GA 30326

Wade Inc.  
P.O. Box 391  
Batesville, MS 38606

Wade, Inc.  
c/o Victoria J. Prince  
Attorney at Law  
P.O. Box 1563  
Batesville, MS 38606

Wade, Inc.  
P.O. Box 551  
Greenwood, MS 38935

Wade, Inc.  
3000 Highway 82 E  
Greenville, MS 38704

Warrington Clinic  
1024 Martin Luther King Drive  
Marks, MS 38646

Wexford & James, LLC  
2910 Westown Parkway, Suite 102  
West Des Moines, IA 50266

Whitten Insurance Agency  
283 Highway 6 W  
Batesville, MS 38606

Whitten Insurance Agency  
283 Highway 6 W  
Batesville, MS 38606

Whitten Insurance Agency  
283 Highway 6 W  
Batesville, MS 38606

Yalobusha General Hospital  
P.O. Box 728  
Water Valley, MS 38965